

<b>CLAIMS ONLY</b>						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
<b>CLAIMS</b>										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.
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TOTAL IND.										
TOTAL DEP.										
TOTAL CLAIMS										

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS